

ZONING PERMIT APPLICATION

This application must be submitted in p	erson. For a submittal a	appointment, call 213-974-6438.
THIS SEC	CTION - STAFF USE ONL	
Plany	<u>Code Section</u>	Project No.
Zone:		Permit No.
CSD:		/
700:		/
ESHA/SEA:		RFS No.
SA: N E W SD: 1 2 3 4 5 ZD: 1. Subject Property (Sujeto Propiedad)		GB? Y N LID? Y N DT? Y N
Assessor's Parcel Number(s)		Property Size (Gross Area in Acres)
4455-060-007		rioperty size (Gloss Alea III Acres)
Property Address or Site Location		
2003 Delphine Lane, Calabasas, CA		
Name of Business or Establishment (If Applicable):		2
2. Uses (Usos)		
Current: SFR with equestrian facilities	Proposed: SFR with	h equestrian facilities
Continued (Renewal) Previous Permit Number:		Attach copy of Findings and Conditions if available.
3. Project Description (Proyecto) Describe project in deta	il. Attach additional p	page(s) if necessary. See Instructions/Checklist
After-the-fact approval of equestrian facilities on the subject site	, specifically, paddock	corral, corrals and shade structures, an exercise ring, an
rails. Forensic grading plans were prepared by the consulting c questrian facilities. As depicted on the forensic grading plans, t	iledi analmandua (I	
Check/Complete All That Apply:		
☐ No Improvements Proposed ☐ Demolition	n Pi	rivate Septic System Private Well
New Building Construction (SF):	New Impervious Surf	faces (Paving, Roofs, Etc SF):
Grading (CY) Cut: 481 Fill:	Import: 413	Export: 0 Balanced on Site
Alcohol Sales: Beer & Wine or Full Line of Alcohol		On-site Consumption or Off-site Consumption
4. Applicant (Solicitante)	35 35 37	— on site consumption of — on-site consumption
Name: Schmitz & Associates (Nicole Farnoush)		Phone: 818-338-3636
Address: 5234 Chesebro Road #200		Fax: 818-338-3423
City/State: Agoura Hills,CA	ZIP: 91301	Email: nfarnoush@schmitzandassociates.net
5. Agent (Agente) If different from applicant		Lings, mar nousing staimtzandassociates, net
lame: Schmitz & Associates (Nicole Farnoush) - same as above		Phone:
Address:	E	
ity/State:	T-10	Fax:
	ZIP:	Email:
ames	m applicant	
Chip Miclean		Phone: 818-560-6812
ddress: 2003 Delphine Lane		Fax:
ilty/State: Calabasas, CA	ZIP: 91302	Email: mcchip1@gmail.com

Owner / Applicant Certification (Certificación del Solicitante, Agente o Dueño/a) By my signature below, I hereby certify the following: 1. I understand that it is the responsibility of the applicant to substantiate the request through the Burden of Proof. 2. I understand there is no guarantee - expressed or implied - that any permit will be granted. I understand that each matter must be carefully evaluated and after the evaluation has been conducted or the public hearing has been held. Staff's recommendation or decision may change during the course of the review based on the information presented. 3. I understand that planning staff is not permitted to assist the applicant or opponents of the project in preparing arguments for or against a request. 4. I understand that the environmental review associated with the submittal of this application is preliminary, and that after further evaluation, additional information, reports, studies, applications and/or fees may be required. 5. I understand that if my application is denied, there is no refund of fees paid. 6. I understand that submitting inaccurate or incomplete information may result in delays or denial of my application. 7. I certify that the information provided in this application, including attachments, is accurate and correct to the best of my knowledge. 8. I have read and understand the foregoing, and agree to the submittal of this application. Signature (Blue Ink): Print Name: IDIO. Check One: Owner Applicant Oak Tree Certification (Certificación de Árboles Robles) (Pursuant to Chapter 22.56, Pt. 16) Check only one box below: By my signature below, I certify that there are no oak trees or oak tree protected zones (five feet from the drip line of the canopy or within 15 feet of any oak tree trunk, whichever distance is greater) located on the subject property or properties. By my signature below, I certify that there are oak trees or protected zones (five feet from the drip line of the canopy or within 15 feet. of any oak tree trunk, whichever distance is greater) within the subject property or properties, but that no work will be done within these protected areas. This applies to on and off-site oak trees. All oak tree dimensions, including trunk diameter and canopy, should accurately be depicted on the plans and be drawn to an acceptable scale. By my signature below, I certify that project activity will occur within the protected zone of an oak tree (five feet from the drip line of the canopy or within 15 feet of an oak tree trunk) and that I have concurrently submitted an Oak Tree Permit application. All oak tree dimensions, including trunk diameter and canopy, are accurately depicted on the plans and drawn to an acceptable scale. Signature (Blue Ink): Print Name: Check One: Applicant 🔼 Agent Santa Monica Mountains Local Coastal Program (Programa Local Costero de las Montañas de Santa Monica) (Pursuant to Chapter 22.44.600 et seq.) (Complete only if project is within the Santa Monica Mountains Coastal Zone) Check only one box below: It is my understanding that this proposed development project is EXEMPT from the LIP pursuant to Section 22.44.820, and I have attached all of the material required in the LIP Exemption Determination Checklist. It is my understanding that this proposed development project requires a Coastal Development Permit (CDP) pursuant to the LIP, and I have attached all of the material required in the Santa Monica Mountains Local Coastal Program CDP Checklist. Signature (Blue Ink): Print Name: a no us Check One: Owner Applicant Agent 10. Lobbyist Statement (Información de un Grupo de Presión) The Los Angeles County Lobbyist Ordinance, effective May 7, 1993, requires certification that each person who applies for a County permit is familiar with the requirements or Ordinance No. 93-0031 (Lobbyist Ordinance), and that all persons acting on behalf of the applicant have complied and will continue to comply with the requirements of said Ordinance through the application process. By my signature below, I hereby certify that I am familiar with the requirements of Ordinance No. 93-0031 and understand that making such a certification, and compliance with this ordinance, shall be conditions precedent to granting the permit requested, license, contract or franchise. Signature (Blue ink): Print Name: 🚺 (COL Check One: Owner Applicant Agent Lobbyist Permit Number, If Applicable: The information requested is required for a Zoning Permit, Coastal Development Permit, Director's Review and Oak Tree Permit, pursuant to Title 22 of LA County Code. Failure to provide complete and accurate information will cause delay. All required supplemental information must be submitted with this application. Additional application forms are available at: http://planning.lacounty.gov/apps. See instructions and checklist. For assistance, call 213-974-6411 or click <u>http://planning.lacounty.gov/who</u>. IF YOU SUSPECT FRAUD OR WRONGDOING BY A COUNTY EMPLOYEE, PLEASE REPORT IT TO THE COUNTY FRAUD HOTLINE AT 1-800-544-6864 OR <u>www.lacountyfraud.org</u>, YOU MAY REMAIN ANONYMOUS. THIS SECTION - STAFF USE ONLY - LDCC COMMENTS



Los Angeles County Department of Regional Planning



Planning for the Challenges Ahead

ENVIRONMENTAL ASSESSMENT INFORMATION FORM

PLEASE READ CAREFULLY					STAFF USE ONLY
Consult with planning staff to determine	PROJECT NO:				4
if your project is subject to CEQA.	PERMIT NO:				
This questionnaire will assist the county	ENV:			CE? Y N	CLASS#:
in conducting an Initial Study, for	ZONE:			PLAN:	
projects subject to the California	SHA/SEA? Y N	ESHA/SEA:			
Environmental Quality Act (CEQA).	CSD/TOD? Y N	CSD/TOD:			
 Call 213-974-6438 to schedule a 	SUPV DIST:	1 2 3	4 5	ZONED DIST:	
submittal appointment.		COASTAL?	Y N	HSG PERMIT? Y	N
Must be submitted in person.	RFS? Y N	RFS NO:			
Subject Property (Sujeto Propiedad)					
ASSESSOR'S PARCEL NUMBER(S):					
4455-060-007					
SUBJECT PROPERTY ADDRESS OR SITE LOCATION:					
2003 Delphine Lane, Calabasas, CA 91302					
2. Project Description (Descripción del Proyect	o) Attach additio	ınal sheets i	f nerecc	arv	
		•		<u> </u>	
After-the-fact approval of equestrian facilities on the	subject site, speci	lically, padd	ock corr	al, corrals and sha	ide structures,
an exercise ring, and trails. See Project Narrative, at	tached.				
3. Owner(s) (Dueño/a Registrado)					
NAME: Chip Mclean			PHONE:	818-560-6812	
ADDRESS: 2003 Delphine Lane			FAX:		
CITY / STATE: Calabasas, CA Zip: 91302		Ī	E-MAIL:	mcchip1@gmail.	com
4. Applicant (Solicitante) If different from ow	/ner				
NAME: Schmitz & Associates c/o Nicole Farnoush			PHONE:	818-338-3636	
ADDRESS: 5234 Chesebro Road #200	<u> </u>		FAX:	818-338-3423	
CITY / STATE: Agoura Hills, CA	ZIP: 91301		E-MAIL:	nfarnoush@schm	itzandassociates.net
5. Agent (Agente) If different from owner / ag	oplicant				
NAME: Same as Above (Applicant)			PHONE:		
ADDRESS:			FAX:		
CITY / STATE:	ZIP:		E-MAIL:		
Primary contact regarding this questionnaire? Check one: Owner Applicant Agent					

		ENVIRONMENTAL ASSESSMENT INFORMATION FORM Project No.:
1.	Desc	cribe each item as it relates to the <u>PROJECT SITE</u> :
	_a.	Existing land uses / structures: Existing single family residence and equestrian facilities. This includes paddock corral,
	sn:	ade structures, exercise ring, and trail.
	ь.	Topography / slope: Moderate to gentle slopes with areas of relatively level topography. Elevations on the property range
	fro	m approximately 950 feet above mean sea level along the eastern boundary to approximately 1100 feet in the northwest corner.
	c.	Vegetation: Vegetation on the property consists of five types: CA annual grassland alliance, eucalyptus alliance, developed landscape
1	Salix la	asiolepis Baccharis salicifolia association, and Adenostoma fasciculatum/malosma/ceanothus megacarpus association mixed chaparral.
	d.	Wildlife: See exhibit F of attached Biological Assessment.
	е.	Surface waters: Property is within the Cold Creek Watershed, which is tributary to Malibu Creek. An unnamed blueline
	dra	inage crosses the property in its eastern one-half in a north to south direction (see Bio Assessment).
	f.	Cultural / historical resources: None.
	g.	Other:
	Desc	ribe each item as it relates to the <u>SURROUNDING AREA</u> :
	_a.	Existing land uses / structures: Properties to the East and South developed with single family residences and equestrian uses.
	Prop	perties to the West and North remain undeveloped.
	b.	Topography / slope: Moderate
	c.	Vegetation: H1 Buffer/Quiet Zone, H2 and H3 habitat.
	<u>d.</u>	Wildlife: Open space and gated properties to the East and South of the property; whereas to the West and North of the property
	MITO	ws for free movement of the wildlife corridor.
	_e	Surface waters: Surrounding properties to the East and South are within the Cold Creek Watershed, which is tributary to Malibu Creek.
	_	

g. Other:

f. Cultural / historical resources: No known resources.

	Project No.:
3.	Will the proposed project change the pattern, scale or character of the surrounding general area? ☐ Yes ☒ No If yes, describe:
4.	What steps can be taken to mitigate any adverse effects that may result from this project? List the adverse effect first, then the mitigation measure(s) to reduce that effect. Existing development is located in H3 habitat.
5.	Have the water, sewer, fire and flood control agencies serving the project been contacted to determine their ability to provide adequate service to the proposed project?
	X Yes No If yes, attach response Existing SFR with existing services.
EC	DLOGY
6.	Are there identifiable landslide risk, fault lines or zones, liquefaction hazards, expansive soils, or subsidence risks which that would impact the project? Is the project site located on uncompacted fill? Yes X No X Unknown If yes, describe:
7.	Does the project propose grading or alteration of topography, or contain slopes over 25 percent? X Yes No If yes, describe: Forensic grading plans were prepared by the consulting Civil Engineer. Total grading for the equestrian uses total 481 cubic yards of cut
	and 413 cubic yards of fill, with 0 cubic yards of import/export.
LO	OD
8.	Does the project site contain a drainage course or waterway?
	X Yes No Unknown If yes, describe:
	There is a small unnamed drainage court that crosses the site in the north-to-south direction. See Bio Assessment, attached.
9.	Is the project located within or contain a floodway, flood plain or designated 100-year flood hazard zone? Yes X No Unknown If yes, describe:

ENVIRONMENTAL ASSESSMENT INFORMATION FORM

	Project No.:
10.	Will the project alter the existing drainage pattern of the site or area? Do offsite drainage facilities have capacity to accommodate site runoff?
	Yes X No Unknown If yes, describe:
FIRE	
	Is the property located within a Very High Fire Hazard Severity Zone (VHFHSZ) or hillsides area with moderately-to-very dense vegetation?
	X Yes No Unknown
12.	Distance from project site to nearest fire station: 2.8 miles
NOI	SF
	Describe existing noise sources and noise levels that now affect the site (aircraft, roadway noise, railroads, industry, etc.) and how they will affect proposed uses:
	The property is located in a private gated subdivision in the Santa Monica Mountains, that is away from existing noise sources.
14.	Describe the type of short-term and long-term noise to be generated, including the source and amount:
	None anticipated.
15.	Are sensitive receptors, e.g., schools hospitals, residences, located near the project site? How will project noise levels affect adjacent properties and on-site uses?
	No.
16.	What methods of soundproofing are proposed?
	None, as no noise is anticipated.
WAT	TER QUALITY
17.	Does the project propose the use of a private water well?
	Yes X No Unknown - site has existing water well for SFR.
18.	Does the project propose private wastewater disposal or on-site septic systems?
	Yes X No - site has existing septic system to SFR - equestrian uses will not impact septic system.
19.	How much wastewater will the project generate? XI Unknown

ENVIRONMENTAL ASSESSMENT INFORMATION FORM

	ENVIRONMENTAL ASSESSMENT INFORMATION FORM Project No.:
20.	Are there any bodies of water (including domestic water supplies) into which the site drains? Yes No X Unknown if yes, describe:
AIR C	QUALITY
21.	Will the project result in increased air emissions or create objectionable odors during or after construction? Yes X No Unknown If yes, describe:
SRFF	NHOUSE GASES
22.	Will the project generate greenhouse gas (GhGs) emissions, either directly or indirectly, that may have a significant impact on the environment (i.e., on global climate change)? The significance of the impacts of a project's GhG emissions should be evaluated as a cumulative impact rather than a project-specific impact. Yes X No Unknown If yes, describe:
	Will the project conflict with any applicable plan, policy, or regulation adopted for the purpose of reducing the emissions of greenhouse gases including regulations implementing California AB 32 of 2006, the General Plan policies for implementing actions to reduce greenhouse gas emissions?
	Yes X No Unknown If yes, describe:
NOT	
3 IOT/ 24.	s Is the project located within a Significant Ecological Area (SEA), SEA Buffer, Coastal Zone, coastal Environmentally Sensitive Habitat Resource Area (ESHA), Wildflower Reserve Area, or within a relatively undisturbed natural area?
	X Yes No If yes, describe:
	Property is located in Santa Monica Mountain Coastal Zone - property biota includes H1, H1 Buffer, H2 and H3 habitat. See Biological Assessment, attached.

	Project No.:
25.	Will grading, fire clearance or other improvements remove natural habitat or relatively undisturbed area? Yes X No If yes, describe:
26.	Does the project contain coastal sage scrub, oak woodland, sycamore riparian, oak woodlands, wetlands, or other sensitive natural communities?
	X Yes No Unknown If yes, describe:
	The Property has been identified to contain sensitive natural communities, although none will be impacted by development. See Bio re
27.	Does the project area contain any known suitable habitat for listed endangered or threatened species, other sensitive species, or a wildlife corridor?
	X Yes No Unknown If yes, describe:
	See Exhibit H of attached Bio report "Sensitive Wildlife Species," although none will be impacted by development.
AK.	TREES
28.	Are protected oak trees present? (Oak Tree Permit may be required.)
	X Yes No. If yes, indicate: - landscaped Oak Trees present on site. Total number of protected oak trees to be encroached:0
	Total number of protected oak trees to be removed :0
	Would the project, including project buildout, require removal of protected oak trees?
ULT	URAL RESOURCES
	Does the project site contain rock formations indicating potential paleontological resources?
	Yes X No Unknown If yes, describe:

	ENVIRONMENTAL ASSESSMENT INFORMATION FORM Project No.:
31	Does the project site contain known archeological resources, or historic structures or sites? Yes No Unknown If yes, describe:
	RICULTURE AND FORESTSRY Does the project conflict with existing agricultural zoning or convert existing farmland to a non-agricultural use? Yes X No Unknown If yes, describe:
AES	THETICS
33.	Is the project visible from a scenic highway or is it located within a scenic corridor? Yes X No Unknown If yes, describe:
34.	Will the project impact a riding or hiking trail, ridgeline, shoreline view, significant natural feature or previously undisturbed area?
	Yes X No Unknown If yes, describe
35.	Is the proposed use out-of-character in comparison to adjacent uses due to height, bulk or other features? Yes X No Unknown If yes, describe:
36.	Will the project create sun shadow, light or glare problems? Yes X No Unknown If yes, describe:

ENVIRONMENTAL ASSESSMENT INFORMATION FORM

	Project No.:
TRA	FFIC / ACCESS
37.	Estimate the post-construction vehicular traffic generated by the proposed project:
	X 0 – 50 trips per day
38.	Explain what effects the project may have on parking, vehicular traffic circulation, and potential traffic safety hazards in the area:
	Project will have no impact to parking. There is existing parking located on site.
39.	Explain what effect, if any, the project may have on pedestrian or other non-motorized circulation in the area:
	None.
40.	Will the project conflict with public transit facilities (bus and rail) or bicycle facilities and bicycle lanes? Yes X No Unknown If yes, describe:
	— To Estate — onthown if yes, describe.
SCHO	OOLS (Residential Projects Only)
41.	Indicate school district(s) serving the project:
	LVUSD
42.	Estimate the number of school children who will reside in the proposed project:
43.	Do existing school facilities adequately accommodate the proposed project?
	Yes No X Unknown
	Verified by school administration? Yes No If yes, attach verification. If no, describe provisions for additional classroom capacity:

ENERGY CONSERVATION

44. Describe energy sources for the proposed project, and proposed designs, materials or features of the project that promote energy conservation or use of non-fossil-fuel energy sources.

ENVIRONMENTAL ASSESSMENT INFORMATION FORM Project No.: N/A HAZARDOUS MATERIALS 45. In the known history of the property, has there been any use, storage, or discharge of hazardous or toxic materials? Examples of hazardous or toxic materials include, but are not limited to, PCB's; radioactive substances; and herbicides, pesticides; paints; fuels, oils, solvents, or other flammable liquids or gases. Yes X No Unknown If yes, please list the materials and describe their use, storage, or discharge on the property, including the dates of use, if known. Also note underground storage of the above: 46. Will the proposed project involve the temporary or long-term use, storage, discharge, or disposal of hazardous and/or toxic materials, including but not limited to those examples listed above? Yes No If yes, provide an inventory of all such materials to be used and method of disposal: **NON-RESIDENTIAL PROJECTS** 47. Workforce: a) Number of daily work shifts: _____ b) Operating days and hours: ______ c) Maximum number of employees: ___ d) Maximum number of employees per shift: ______ 48. Describe end products: 49. Describe waste products, including nonhazardous and hazardous waste:

50. Method of nonhazardous and hazardous waste disposal:

		ENVIRONMENTAL ASSESSMENT INFORMATION FORM Project No.:
5	51.	Do operations require any pressurized tanks? Yes No If yes, describe
	,	
5	2.	Will delivery or shipment trucks travel through residential areas to reach the nearest highway?
		Yes No. If yes, describe.
5	i3.	Other project or site condition information:
		er / Applicant / Agent Application Certification (Certificación del Solicitante, Agente o Dueño/a)
1. 2. 3. 4.	l u ev l u l u l c kn	y signature below, I hereby understand and certify the following: Inderstand that the environmental review associated with the submittal of this form is preliminary, and that after further aluation, additional information, reports, studies, applications or fees may be required. Inderstand that, whether or not my application is approved or denied, there may be a partial or no refund of fees paid, and; Inderstand that submitting inaccurate or incomplete information may result in delays or the denial of my application, and; Iteratify that the information provided in this form, including attachments, is accurate and correct to the best of my Inderstand that submitting inaccurate or incomplete information may result in delays or the denial of my application, and; Inderstand that submitting inaccurate or incomplete information may result in delays or the denial of my application, and; Inderstand that submitting inaccurate or incomplete information may result in delays or the denial of my application, and; Inderstand that submitting inaccurate or incomplete information may result in delays or the denial of my application, and; Inderstand that submitting inaccurate or incomplete information may result in delays or the denial of my application, and; Inderstand that submitting inaccurate or incomplete information may result in delays or the denial of my application is approved or denied, there may be a partial or no refund of fees paid, and; Inderstand that submitting inaccurate or incomplete information may result in delays or the denial of my application, and; Inderstand that submitted in the submitted
PF	UNT	NAME: Nicole Farnoush CHECK ONE: Owner Applicant Applicant
Ar	cha	eological Statement (Declaración Arqueológico)
pr wi	nte ese Il bo Iditi	r the discretion of the Dept. of Regional Planning, proposed projects may be forwarded to the Archeological Information or for consultation regarding potential impacts to historical and cultural resources, in order to assure the protection and rivation of Los Angeles County's historic and archeological resources. This review requires a nominal processing fee which be billed directly to the applicant by Cal-State University. By my signature below, I understand this process and possible onal fees.
	_	TORE (BLUE INK)! DATE: 3 3 1 8 CHECK ONE: Owner Applicant Agent

RECORDING REQUESTED BY: Fidelity National Title Company

AND WHEN RECORDED MAIL TO:

Thomas P. McLean 2003 Delphine Lane Calabasas, CA 91302

Order No. 32685 Escrow No. 1-2750-KD Parcel No. 4455-060-007



SPACE ABOVE THIS LINE FOR RECORDER'S USE

GRANT DEED
THE UNDERSIGNED SELLER DECLARE THAT DOCUMENTARY TRANSFER TAX IS \$2,893.00 and CITY \$ computed on full value of property conveyed, or computed on full value less liens or encumbrances remaining at the time of sale. unincorporated area: Calabasas, and
FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, Robert J. Adair and Patti J. Adair, Husband and Wife as Community Property
hereby GRANT to Thomas P. McLean and Anna A. McLean , Trustees of The Anna and Chip McLean Living Trust dated June 24, 2006 and any amendments thereto.
the following described real property in the County of Los Angeles, State of California:
LEGAL DESCRIPTION AS PER EXHIBIT "A" ATTACHED HERETO AND MADE A PART HEREOF AKA: 2003 Delphine Lane, Calabasas, CA. 91302
Patti J. Adair Patti J. Adair Patti J. Adair
STATE OF CALIFORNIA S.S. COUNTY OF LOS Angeles S.S. On 10-24-13 , before me, Rochel Gome2 a notary public in and for said State, personally appeared Robert J. Adair and Patti J. Adair who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.
WITNESS my hand and official sed. Signature (Seal)

Mail Tax Statement to: SAME AS ABOVE or Address Noted Below

EXHIBIT A

LEGAL DESCRIPTION

THE LAND REFERRED TO HEREIN BELOW IS SITUATED IN THE COUNTY OF LOS ANGELES. STATE OF CALIFORNIA, AND IS DESCRIBED AS FOLLOWS:

PARCEL 1:

LOT 7 OF TRACT NO 51634, COUNTY OF LOS ANGELES, STATE OF CALIFORNIA, AS PER MAP RECORDED IN BOOK 1255 PAGES 32 TO 36, INCLUSIVE OF MAPS, IN THE OFFICE OF THE COUNTY RECORDER OF SAID COUNTY.

EXCEPTING THEREFROM NON-EXCLUSIVE EASEMENTS FOR INGRESS AND EGRESS AND INCIDENTAL PURPOSES, TOGETHER WITH THE RIGHT TO GRANT THE SAME TO OTHERS, OVER AND ACROSS THOSE PORTIONS OF LOTS 1 TO 13 INCLUSIVE, OF SAID TRACT NO 51634, SHOWN AND DELINEATED AS "ABERCROMBIE LANE, DELPHINE LANE, AND COLD CANYON ROAD, PRIVATE AND FUTURE STREET", ON THE MAP OF SAID TRACT.

ALSO EXCEPTING THEREFROM, EASEMENTS SET FORTH IN THE DECLARATION OF COVENANTS, CONDITIONS. RESTRICTIONS AND RESERVATIONS OF EASEMENTS FOR ABERCROMBIE RANCH ESTATES (DECLARATION) RECORDED IN THE OFFICE OF SAID COUNTY RECORDER OF CALIFORNIA ON FEBRUARY 12, 2001, AS INSTRUMENT NO 01-0225010, OFFICIAL RECORDS.

PARCEL 2:

A NON-EXCLUSIVE EASEMENT, APPURTENANT TO PARCEL 1 ABOVE, FOR INGRESS AND EGRESS AND INCIDENTAL PURPOSES, OVER AND ACROSS THOSE PORTIONS OF LOTS 1 TO 13 INCLUSIVE. OF SAID TRACT NO 51634, SHOWN AND DELINEATED AS "ABERCROMBIE LANE, DELPHINE LANE AND COLD CANYON ROAD, PRIVATE AND FUTURE STREET, ON THE MAP OF SAID TRACT.

EXCEPTING THEREFROM THAT PORTION LYING WITHIN PARCEL I ABOVE.

PARCEL 3:

A NON-EXCLUSIVE EASEMENT APPURTENANT TO PARCEL 1 ABOVE, ON AND OVER THE "COMMON AREA" AS DEFINED IN THE DECLARATION FOR ACCESS, USE, OCCUPANCY, ENJOYMENT, INGRESS AND EGRESS OF THE AMENITIES LOCATED THEREON, AS CONTAINED IN THAT CERTAIN DECLARATION OF COVENANTS, CONDITIONS, RESTRICTIONS AND RESERVATIONS OF EASEMENTS FOR ABERCROMBIE RANCH ESTATES (DECLARATION) RECORDED IN THE OFFICE OF SAID COUNTY RECORDER OF CALIFORNIA ON FEBRUARY 12, 2001, AS INSTRUMENT NO. 01-0225010, OFFICIAL RECORDS.

APN: 4455-060-007

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ALTA Homeowner's Policy of Title Insurance (02-03-10)

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County of Los Angeles Department of Regional Planning Hall of Records (13th Floor) 320 West Temple Street Los Angeles, CA 90012

RE: Agent Authorization

Schmitz & Associates, Inc. is authorized by me/us, as the owner(s) of the property located at APN 4455-060-007, or more commonly known as, 2003 Delphine Lane, Calabasas, CA to submit requisite applications to the County of Los Angeles Department of Regional Planning and to act on my/our behalf to process said applications.

Should you have any questions, please feel free to contact Don Schmitz or Nicole Farnoush at (818) 338-3636.

Signature of owner's legal representative

Anna McLean, Thomas P. Mclean